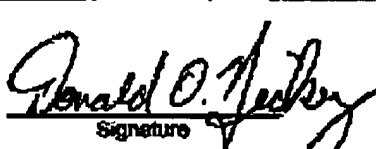


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CARDINAL HEALTH INC. 4/4
CARDINAL HEALTH INC.

NO. 879, P. 7
NO. 621, 2

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3. Nature of conveyance: <input checked="" type="checkbox"/> Assignment <input type="checkbox"/> Merger <input type="checkbox"/> Security Agreement <input type="checkbox"/> Change of Name <input type="checkbox"/> Other _____ Execution Date: 03/20/2000					
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5. Name and address of party to whom correspondence concerning document should be mailed: Name: Donald O. Nicky Internal Address: Cardinal Health, Inc. Street Address: 7000 Cardinal Plaza City: Dublin State: OH Zip: 43017			6. Total number of applications and patents involved: <input type="checkbox"/> 7. Total fee (37 CFR 3.41).....\$ 40.00 <input type="checkbox"/> Enclosed <input checked="" type="checkbox"/> Authorized to be charged to deposit account 8. Deposit account number: 50-0256		
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DOC DATE: 03/20/2000

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KEAMEY, PATRICK

DOC DATE: 03/20/2000

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SERIAL NUMBER: 09551361

FILING DATE: 04/18/2000

PATENT NUMBER:

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